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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*Yes*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 21	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials <i>SA</i>				

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## TITLE

Image processing apparatus and method, recording medium, and program

<b>FILING FEE RECEIVED</b> 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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